MINUTES

BRAAM OVERSIGHT PANEL

Seattle Public Library Meeting Room

June 27 and 28, 2005

Panel Members: John Landsverk (Chair), Jeanine Long, Jan McCarthy, Jess McDonald,

Dorothy Roberts

Plaintiffs' Attorneys: William Grimm, Casey Trupin, Tim Ferris

Assistant Attorney General: Steve Hassett

Others: Cheri Coverts, Paul Duarnacean, Alison Millikan, Wanda Flesher, Liz Bedford, Jim Theofelis, Kathy Crane, Dani Myers, Melisa Cull, Scott Hanauser, Ria Moncada, Becky Vaughan, Melinda Vaughan, Janet Skreen, Nancy Ashley, Kiki Keizer, Nancy Testerman, Chris Robinson, Jana Heyd, Patrick Dowd, Suzy Nickel, Laurie Lippold, Ron Hertel, Daniele Baxter, Steve Baxter, Sydney Forrester, Hillary Behrman, Annie Blackledge, Paola Maranan, Stella Hickney Farias, David G. Wood, Ginny Heim, Kim Ambrose, Jonathan Martin, Gilda Lyons, Anne Lee, Karen Pillar, Ruth Kagi, William Bell, Janice Avery, Phoebe Sade Anderson, Karie Castleberry, Mary Meinig, Jan Hoppler, Barb Putnam, Ross Dawson, Cheryl Stephani

I. Overview and Measurement Issues

John Landsverk provided a brief history of the settlement agreement and the Braam Oversight Panel. He said the main purpose of this month's meeting was to review the June 26, 2005, draft of the Design and Specifications document concerning two settlement areas: mental health and adolescent services.

The Panel discussed the sub-populations that will be included in the analysis. Several members expressed interest in including specific outcomes for racial/ethnic categories. The group discussed the fact that the outcomes for youth in foster care overall could improve, while at the same time causing outcomes for some categories of minority youth to decline, and by assessing impacts on sub-populations the Panel can monitor and adjust its work. Agreement was reached on the need to collect and report impact by these sub-populations.

In terms of the regional performance, the Panel discussed the need to view outcomes by the DSHS regions as well as by office level when possible.

Panel members talked about graduation rates, and the controversies surrounding ways to measure this outcome. In addition, there was discussion about what goals should be set for the cohort of youth in foster care. Is the system progressing sufficiently, for example, if this cohort improves by a certain percentage, even if it does not reach the same level as youth not in foster care? It was pointed out that the terms of the settlement reference goals such as "improve" and "better prepare" rather than setting absolutes.

William Bell from the Casey Foundation pointed out that these outcomes measure the performance of two systems: the child welfare system and the school system. Others noted that children's success in school is linked to parental efforts and, for youth in foster care, efforts and advocacy by foster parents. This perspective has led to interest in teaching foster parents advocacy skills.

II. Review of Draft Report

The Panel reviewed the draft document identifying design and specifications for two goal areas of the settlement: education and mental health.

In terms of current efforts, the Panel learned that the Office of the Superintendent of Public Instruction and the Children's Administration are developing protocols for information sharing with each school district and the Children's Administration. Since the geographical boundaries for DSHS offices and regions do not match those for the Children's Administration, there are some issues that have to be resolved in terms of data matching. Of the 296 school districts in the state, agreements have been reached with 30 districts and steps are in motion with 30 additional districts.

Janis Avery and Phoebe Sade Anderson from the Treehouse organization answered questions from the Panel about their written comments to the Panel; this document had been mailed at an earlier date.

The group discussed the intent of the settlement in terms of outcomes. Should, for example, goals of 100 percent be set to represent the ideal? Since the Panel's work functions in the context of a settlement agreement, it has a different context than typically occurs in a policy environment. If, for example, an outcome is set at 100 percent and it turns out that the evidence is that this event or accomplishment only occurs in 20 percent of the cases that becomes reason for the plaintiff to return to court.

In terms of settling accountability within dual systems, it was suggested that the outcome could measure the Children's Administration initiation of events, for example, the request for school records, and that would mean that in those instances where school districts do not respond, the agency would not be held responsible.

Representatives from Teamchild pointed out that progress with school districts in terms of improving outcomes for foster youth can occur with protocols, and can also occur without protocols. In terms of obtaining school records, for example, it often comes down to being tenacious in making the request.

In terms of improving educational outcomes for youth in foster care, it was pointed out that one needs to pay attention to key factors: attendance, expulsion, progress with Individual Education Plans.

The group discussed options for setting outcomes in the education area and came up with several alternatives. The topic area includes measurement of truancy, expulsions and suspensions, transfers from one school or district to another, and educational progress.

The Panel talked about the option of setting two categories for outcomes, with one level concerning the outcomes of primary interest to the settlement agreement, and the second serving a more auxiliary purpose.

Independent Living Skills programs were discussed, and various ways to ensure that youth are prepared to live on their own. The Ansell-Casey Life Skills Assessment instrument is used by the state in determining areas of strengths and weaknesses for independent living. By policy, it is administered for youth at age 15. Panel members asked whether this assessment instrument is administered more than once. The group talked about the need to have a different set of goals for youth in foster care who are expected to return home as compared to those who will be living on their own. Panel members expressed interest in knowing if this assessment instrument can be used on younger children.

Casey Trupin pointed out that the recent Casey National Alumni Study concerning foster care youth provided useful information on the difficulties youth face when they "age out" of the foster care system, and it includes youth from Washington State.

Panel members talked about the feasibility of adding a new outcome related to Independent Living Skills programs. John Landsverk mentioned that there is no rigorous evidence demonstrating the success of programs in achieving their intended goals.

In talking about this topic, the group returned to a discussion about disproportionality. Dorothy Roberts was asked to describe the differences between various terms often used in connection to this topic. She said that *disparity* is a broad term encompassing several meanings, *over-representation* references a larger proportion of minority youth from the general population in a certain system (foster care, juvenile justice) compared to their numbers in the general population, and *disproportionality* is used to describe differences in outcomes between minority and majority populations.

The next phase of the discussion concerned children who run from their placement. The Children's Administration had provided the Panel with information on the number of children who run from care, the duration of time they were gone, and the number of previous placements. The quarterly statistics must be multiplied in order to obtain a figure for the year; last year 648 youth ran from care.

The Panel has received a copy of the proposed policy concerning Children Missing from Care, and has sent its comments to the Children's Administration. Chris Robinson, a Regional Administrator with the Children's Administration, noted that law enforcement prefer the caretaker to file the report with them because they are knowledgeable about the child's schedule and what he or she was wearing that day. Generally speaking, she said they do not have fingerprints or recent photos of children in foster care.

There was general discussion about how to set an appropriate target for this outcome, as it is highly unlikely that running can be completely eliminated.

Jim Theofelis pointed out that providers have a self interest in reporting the child as missing because of concerns about liability. If anything, he said, sometimes these calls are made too quickly and the child has actually not intentionally run away but is delayed.

Steve Baxter noted that it is not a crime for children in Washington to run away, and the police are not willing to pick up runaways.

There was discussion about setting outcomes concerning the reoccurrence rate of children who run, in addition to the overall rate. Casey Trupin pointed out that the initial run can carry high risks for significant harm. The group talked about the value of decreasing children's exposure to the harms associated with running away, such that a reduction in the time away from care could be a very positive outcome. Jim Theofelis said an important additional goal is to prevent the behavior.

The group discussed the HOPE Center beds; youth can self-refer to this resource, but the "gatekeepers" often are not aware of this right.

The value of teaching youth in foster care about independent living skills was discussed; these services in Washington, like many states, are under funded. Washington law indicates that DSHS can provide these services, but does not mandate that they be available.

The group discussed avenues to give youth a voice in decision-making about placements. It was pointed out that attorneys for the child, where available, can help facilitate that voice.

Under Washington law, foster parents do not have "standing" in court. They are, however, notified about hearings. In some people's minds, this notification is as good as having official standing.

Turning to the topic of mental health, the group discussed the screening process provided by what is called the CHET (Child Health & Education Track, formerly called Kidscreen). The settlement agreement calls for a physical health screening, and the standards for accreditation require that this screening occur within 72 hours of the child being taken into care. At present, decisions on whether to take the child to an emergency room, clinic, or physician during this time period are made on an individual basis. There is a requirement that the youth receive an EPSDT screening within 30 days and this covers issues of physical health.

Jess McDonald pointed out that the state is opening itself to liability by waiting this long for a physical health screening.

Bill Grimm noted that rather than measuring whether a service plan has been entered into a file or a check box filled on a computer screen, attention must be paid to the quality of the services received. The courts do not scrutinize the plans. A sample of cases may need to be reviewed.

John Landsverk noted that case reviews are very expensive and, where possible, he would like to accomplish the settlement goals by setting and monitoring standards.

The group discussed what kind of emergency mental health services are available to foster parents. Chris Robinson said a new 1-800 line has been established. During office hours, the foster parent is to call the regular worker and this 1-800 number works after hours. It is staffed by Children's Administration personnel. There was discussion about the relative value of a 1-800 line that did not function over 24 hours.

Shifting to a discussion about the proposed "No Wrong Door" staffings in the settlement agreement, Jess McDonald said that a recent response to a memo from the Panel indicated that the Children's Administration had decided not to pursue these staffings, and instead to shift to multi-disciplinary staffings. In addition, the department has decided not to pursue a re-design of adolescent services, another action step in the settlement agreement. He noted that when the

department decides to alter elements of the agreement, it is important that the Panel and the plaintiffs' attorneys be informed of these decisions.

Cheryl Stephani indicated that the "No Wrong Door" staffings have evolved into what is being termed consolidated staffings under a policy for "shared planning" that is under review. The redesign of adolescent services has been supplanted by the Children's Mental Health Initiative.

Casey Trupin noted that the terms of the settlement do not allow the department to take away items; the Panel can modify the terms, and the department and the plaintiffs' attorneys can suggest and support changes.

A member of the audience wanted clarification whether the terms of the settlement apply to contractors with the department, as well as the department. The answer was yes.

Patrick Dowd with the Office of the Children and Families Ombudsman suggested that the quality review process conducted by the Children's Administration is a venue to pursue some of the outcomes of interest to the Panel.

June 28, 2005

The Panel continued their discussions regarding mental health and adolescent services for the second day.

In terms of mental health care, the initial screening for youth in foster care is the Child Behavior Checklist. If the child falls into the borderline or clinical category, he or she is referred to the Regional Support Network for an assessment. All foster care children are entitled to an assessment. The decision about whether they are eligible for services is made based on the criteria of "medical necessity."

The Children's Administration also has some funds to pay for mental health services for children not eligible under RSN services. These funds are limited, and are designed to cover "adjustment issues"; they need to be approved as exceptions. The regions determine how to spend these funds, and there is no statewide policy on their use.

Panel members asked about the department's ability to match data from the RSNs and the CA data base of youth in foster care. These data can be matched, but it was reported that there is a two-year lag to do so.

John Landsverk said that there have been reports from Children's Administration staff that foster care youth are denied services at the RSNs; it has been estimated that close to half (44 percent) the population is not receiving services. He asked that staff indicate to the Panel how that practice could be changed, and how the Panel could help staff in meeting the terms of the settlement. He pointed out that with the enormous needs of adults; it stands to reason that they will be allocated most of the money unless specific decisions are made to reserve some funds exclusively for children.

Chris Robinson said that some children refuse treatment, and those over 13 have the right to do so. In addition, there are concerns about the effectiveness of the therapists who are available, and some clients do not want to continue to attend the sessions because of poor quality.

John Landsverk pointed out that the data indicate that 44 percent of the youth are not even getting to the door for a first visit.

Jess McDonald asked whether a mandate is needed to ensure that youth in foster care get services from the RSNs.

Daniele Baxter said that when she called the RSN regarding services for a foster care child, she was given an appointment for what is called "intake," but this appointment was in 6 to 8 weeks. There have been problems getting medication for children. Things have improved now that there is a special person in her RSN area whose position is co-funded by the CA and the RSN.

Cheryl Stephani pointed out that the mental health system is undergoing very significant changes because of legislation passed in 2005.

Jess McDonald said that any time an RSN decides not to serve a child screened as needing services by CA there should be written documentation and that information should be sent to CA leadership, the parties in the settlement, and the Panel. Unless this information is requested soon, the same confusion about what is happening will continue.

Dorothy Roberts said that the effectiveness of services also needs to be tracked; poor services can be harmful to children.

Karie Castleberry from the Mental Health Division said that a new mechanism will be in place in September where denials of service to children screened as needing services will require a written notice. This notice will be sent to the Mental Health Division.

Jess McDonald expressed frustration about the lack of progress in solving the problem of getting mental health services for foster care youth. He said there has been what appear to be a "frenzy of inactivity" and a lack of commitment to resolving the problem.

The Panel members discussed the importance of having someone in a high leadership level attending the Panel meetings from the Division of Mental Health. Panel members agreed to send a letter to the Secretary of DSHS requesting the attendance of such a person.

Mary Meinig said it would be helpful to know how many youth in foster care are screened as needing mental health services, then this number compared to the number referred for services, and now many received services and where.

Jann Hopler said that the referrals protocols in CA vary. In some regions, calls are made to the RSN, and in others, letters are sent.

Karie Castleberry said that the Mental Health Division will be issuing new contracts based on the two mental health reform bills passed by the 2005 Legislature, and many features of the contracts will change. The requests for qualifications will be issued in September and will involve competitive procurement. The requirement for "notice of action" for denial of services will be in these new contracts, and the division will monitor the results.

John Landsverk said that the foster parents, the CA, and the children's attorney should receive a copy of this notice of action.

Karie Castleberry said that under the new contracts, the RSN cannot delegate certain decisions to providers, as was the case before. The requirement that a notice of action for denial of services, for example, has been in place since August 2003 but was inconsistently applied because the contracts with providers did not uniformly require such action.

The new legislation, she explained, allows the current RSNs to apply, and they have the "right of first refusal." After that, she pointed out, other providers can apply. The Joint Mental Health Task Force is overseeing this process and has a consultant who is helping design contract provisions that include federal and state requirements as well as industry standards. She said the new contracts will "significantly raise the bar" for mental health services.

Jess McDonald said the state needs to monitor the timelines for provision of services, as well as the receipt of services by youth in foster care.

The group discussed the information that is provided to foster parents about the mental health system and how to access services for youth in care. John Landsverk pointed out that the state is responsible for youth in foster care, and the burden should not be placed on foster care parents.

Why have so many youth in foster care been denied services when the screening instrument indicates their need? Karie Castleberry said that it has been frustrating for the Division of Mental Health to pursue this question, as they have not had individualized information that they can use to question the RSNs.

John Landsverk said that the Children's Administration has helped the RSNs by administering the assessment, and that work would normally be left to the RSNs.

Panel members suggested that the contracts include explicit language about the need to serve youth in foster care who have been assessed as needing mental health services. Karie Castleberry said she would talk to division staff and leaders about the discussion at this meeting.

The group discussed the situation with developmentally disabled children; in many cases, mental health agencies see their services as not appropriate for this population and therefore deny their eligibility. Multi-disciplinary staffings were mentioned as the best solution for these situations.

The discussion turned to the topic of continuity of mental health providers. In many RSNs, interns are extensively used, and this can lead to problems with quality of care as well as diminished continuity, because the interns have limited time in this role. The disruption of providers is seen as a significant problem in some parts of the state.

Jess McDonald pointed out that the outcome assumes a one-to-one relationship rather than a team.

Dorothy Roberts said that we are back to the issue of quality of care.

Karie Castleberry said that the contracts require clinical oversight by a qualified professional and, for children, this means the supervision of a professional with a specialty in children.

Jeanine Long said that there are financial reasons for mental health organizations to use entry level persons. The pay for these positions is not great, she said, and thus high turnover is a predictable outcome.

John Landsverk agreed, saying that the settlement agreement cannot take on the tremendous labor force issues associated with public mental health care. It may be possible to require that the more qualified providers within the system treat foster care youth.

Jan McCarthy said that the goal is to do everything possible to establish a "therapeutic relationship" with the child that provides continuity of care.

The group discussed evidence-based interventions with youth and families that focus on service provision by a team rather than an individual therapist. In some cases, these services are more quickly embraced by persons new in their career rather than the individuals who have been practicing for decades.

Steve Hassett noted that the "best interest standard" needs to be the starting point. Many legal requirements conflict with each other, he said, including the preference for kin placements and the direction that children not be moved to a new school district. This situation also brings conflicts into question and may need to be operationalized with the best interest standards.

The group discussed ways to minimize the disruptive aspects of a change in providers.

III. Professional Standards

The settlement agreement calls for the Panel to set professional standards in each goal area. Jess McDonald said the Panel will relate standards from various professional groups to the elements in the settlement agreement. He said the Panel will also be considering ways to take advantage of the peer review process that is embedded in accreditation.

John Landsverk said that many professional standards have applicability, and therefore the Panel will emphasize those standards that can inform the goal and/or action step, and are directly relevant.

The group talked about the regional plans that have been established between the Children's Administration and the Regional Support Networks. Jan McCarthy noted that these plans are not specific to youth in foster care. She asked how the state will monitor the implementation of these plans.

Chris Robinson said that the provisions call for a dispute resolution process. Barb Putnam from Children's Administration said that the agency is setting up information sessions in the field to discuss the agreements. She said that each agreement is different.

Bill Grimm said that from his perspective, the value comes in the implementation of the agreements, how they operate on a day-to-day basis.

IV. Baseline Data

The settlement agreement calls for improvement in several areas, thus requiring good information on the current baseline. John Landsverk said that baseline information can be used for some areas, but not all. Jeanine Long asked how the Panel will complete its progress report given this fact. She said that the Panel needs to view its work over the long term, and that the parties are working together to create an apparatus that will not only function as a legal apparatus, but also manage practices on the ground.

John Landsverk said that the Panel's first product will be released July 15th; this document will likely reveal limitations in the existing data collection systems. He requested that the parties and stakeholders review the report in detail and let the Panel know the strengths and weaknesses of the proposals.

V. Comments From the Audience

Casey Trupin said that there are cross-over issues that concern the Juvenile Rehabilitation Administration, and the Panel may want to request that someone from that agency attend the Panel meetings.

VI. Next Meeting

The next Panel meeting will be July 25 and 26 in Olympia.